

## DECLARATION AND POWER OF ATTORNEY

USA/PCT

As a below named inventor, I hereby declare that:

- (a) My residence and Citizenship are as stated below my name. My P.O. (mailing) address is the same as my residence unless otherwise stated.
- (b) I verily believe I am/we are the original, first and sole/joint inventor(s) of the subject matter that is embraced by and for which a patent is sought on the invention entitled: **MULTILAYER STRUCTURES** and the specification of which: ☐ is attached hereto (\_\_\_\_).  
(check one) ☒ was filed on March 31, 2000 as (44419).  
Application No. 09/539,587  
and was amended on \_\_\_\_\_

- (c) I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.
- (d) I acknowledge my duty under 37 CFR 1.56 to disclose to the U.S. Patent and Trademark Office all information known to me to be material to patentability as defined in 37 CFR 1.56(b). If this application is a continuation-in-part application, I acknowledge the duty to disclose all information known to me to be material to patentability as defined in 37 CFR 1.56(b) that became available between the filing date of the prior application from which priority is claimed in part (f) below, and the national or PCT international filing date of this application.
- (e) I hereby claim foreign priority benefits under 35 U.S.C. § 119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate listed below or §365(a) of any PCT international application that designated at least one country other than the United States of America listed below, and also identify below any other foreign equivalent application for patent or inventor's certificate or any other equivalent PCT international application having a filing date before that of the application on which priority is claimed:

Number	PRIOR FOREIGN APPLICATION(S) Country or PCT	Day/Month/Year Filed	PRIORITY CLAIMED	CERTIFIED COPIES INCL.
<input type="checkbox"/>	Additional claims for benefit are attached.		<input type="checkbox"/>	<input type="checkbox"/>

- (f) I hereby Claim the benefit under 35 U.S.C. §119(e) of any United States provisional application(s) listed below, or under 35 U.S.C. §120 of any United States application(s), or under § 365(c) of any PCT international application designating the United States of America listed below:

US or PCT Appln. Serial No.	Filing Date	Status at Application Filing Date
<u>60/127,429</u>	<u>April 1, 1999</u>	<u>Pending</u>
<u>60/131,840</u>	<u>April 30, 1999</u>	<u>Pending</u>

☒ Additional claims for benefit are attached.

I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith. Address all correspondence to The Dow Chemical Company's appointed counsel at:



This appointment, including the right to delegate this appointment, shall also apply to the same extent it is applicable under the laws of the United States of America to any proceedings established by the Patent Cooperation Treaty.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements are made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both under 18 U.S.C. § 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Inventor(s):

At: Horgen, Switzerland  
this 16 day of MAY, 2000

Signature: [Signature]  
Full Name: Monald Wevers  
Residence: Waldstrasse 62  
8135 Langnau am Albis  
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At: Horgen, Switzerland  
this 15 day of May, 2000

Signature: [Signature]  
Full Name: Antonio Batistini  
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At: Horgen, Switzerland  
this 16 day of MAY, 2000

Signature: [Signature]  
Full Name: Karin Katzer  
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At: Horgen, Switzerland  
this 16 day of May, 2000

Signature: [Signature]  
Full Name: Emil Hersche  
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### ADDITIONAL CLAIMS FOR BENEFIT

**Status at Application Filing Date**  
**Pending**

Signature: \_\_\_\_\_  
Full Name: \_\_\_\_\_  
Residence: \_\_\_\_\_  
  
Country: \_\_\_\_\_  
Citizenship: \_\_\_\_\_  
P. O. Address: \_\_\_\_\_

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Additional names, addresses and signatures to be attached to Form No. **1000**  
 Entitled: **DECLARATION AND POWER OF ATTORNEY**

ADDITIONAL CLAIMS FOR BENEFIT

(f) I hereby Claim the benefit under 35 U.S.C. §119(e) of any United States provisional application(s) listed below, or under 35 U.S.C. §120 of any United States application(s), or under § 365(c) of any PCT international application designating the United States of America listed below:

US or PCT Appln. Serial No.  
60/172,549

Filing Date  
December 17, 1999

Status at Application Filing Date  
Pending

At: \_\_\_\_\_  
 this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

Signature: \_\_\_\_\_  
 Full Name: **Simon Waddington**  
 Residence: **Le Vernay**  
**1184 Luins**  
 Country: **Switzerland**  
 Citizenship: **United Kingdom**  
 P. O. Address: **Same as Residence**

At: \_\_\_\_\_  
 this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

Signature: \_\_\_\_\_  
 Full Name: **Alastair Hill**  
 Residence: **5712 Lantern Lane**  
**Midland, Michigan 48642**  
 Country: **United States of America**  
 Citizenship: **Canada**  
 P. O. Address: **Same as Residence**

At: \_\_\_\_\_  
 this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

Signature: \_\_\_\_\_  
 Full Name: **Dave C. Kelley**  
 Residence: **305 Oak Forrest Drive**  
**Angleton, Texas 77515**  
 Country: **United States of America**  
 Citizenship: **United States of America**  
 P. O. Address: **Same as Residence**

At: \_\_\_\_\_  
 this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

Signature: \_\_\_\_\_  
 Full Name: **Stan Ng**  
 Residence: **11C, Block 3, Rhine Garden**  
**Sham Tseng, N.T., Hong Kong**  
 Country: **SAR, China**  
 Citizenship: **Canada**  
 P. O. Address: **Same as Residence**

At: **Taipei, Taiwan (R.O.C.)**  
 this 11th day of June, 2000

Signature: \_\_\_\_\_  
 Full Name: **Simon Lee**  
 Residence: **3rd Floor, No. 84**  
**Chung Yang 5th Str**  
**Hsin Dien**  
 Country: **Taipei County, Taiwan**  
 Citizenship: **Taiwan**  
 P. O. Address: **Same as Residence**

At: \_\_\_\_\_  
 this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

Signature: \_\_\_\_\_  
 Full Name: \_\_\_\_\_  
 Residence: \_\_\_\_\_  
 Country: \_\_\_\_\_  
 Citizenship: \_\_\_\_\_  
 P. O. Address: \_\_\_\_\_

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